

## AMENDMENT TRANSMITTAL FORM

Customer No.: 23696

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Attorney Docket No.: 990482  
In Re Application of: GARDNER et al.  
Serial Number: 09/382,438  
Filed: 08/25/1999  
Examiner: D.J. RYMAN  
Group Art Unit: 2665

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JUN 06 2003

Technology Center 2600

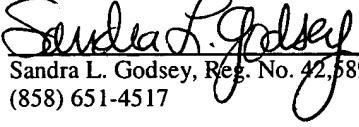
Transmitted herewith for filing is a Response to Office Action in the above identified application.  
In addition, the following documents are enclosed:

1.  A Petition for Extension of Time: (      ) month(s) is hereby requested.
2.  Information Disclosure Statement (IDS):
  - a.  PTO-1449
  - b.  Copies of IDS Citations (number of citations:      )
3.  Change of Attorney's Address in Application.
4.  Other:

| CLAIMS   | (a) Number Remaining After Amendment                                | (b) Highest Number Previously Paid For | (c) Extra Claims                                   | Large Entity Fee | Fee Paid |  |  |
|--|---|--|--|------------------|----------|--|--|
| Total*   | 19  | 20                                     | 0  | x \$18 =         | \$0.00   |  |  |
| Independent**  | 3   | 3                                      | 0  | x \$84 =         | \$0.00   |  |  |
| Multiple Dependent Claim(s):   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |  | \$280            | \$0.00   |  |  |
| EXTENSION FEES   |   |  | <input type="checkbox"/> One Month                 | \$110            | \$0.00   |  |  |
|  |   |  | <input type="checkbox"/> Two Months                | \$410            | \$0.00   |  |  |
|  |   |  | <input type="checkbox"/> Three Months              | \$930            | \$0.00   |  |  |
| INFORMATION DISCLOSURE STATEMENT   |   |  | <input type="checkbox"/> After First Office Action | \$180            | \$0.00   |  |  |
|  |   |  | <input type="checkbox"/> After Final Office Action | \$130            | \$0.00   |  |  |
| TERMINAL DISCLAIMER  |   |  |  | \$110            | \$0.00   |  |  |
| *If the number in column a is less than 20, enter 0 in column c.<br>**If the number in column a is less than 3, enter 0 in column c. |   |  |  | TOTAL FEE        | \$0.00   |  |  |

5.  Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
6.  Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$0.00.  
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
7.  The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 06/02/2003

Signature:   
Sandra L. Godsey, Reg. No. 42,589  
(858) 651-4517

QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 651-4404  
Facsimile: (858) 658-2502



PATENT

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gardner, et al )  
Serial No.: 09/382,438 ) For: Method and Apparatus Using a  
Filed: August 25, 1999 ) Multi-Carrier Forward Link in a  
 ) Wireless Communication  
 ) System  
 ) Group Art Unit: 2665

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RESPONSE TO OFFICE ACTION

Technology Center 2600

MAIL STOP NON-FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attention: Daniel J. Ryman, Examiner

Sir:

In response to the Office Action mailed March 6, 2003, please amend the above-identified patent application as indicated below (a marked up copy of the amended specification and claims is attached to this Amendment):

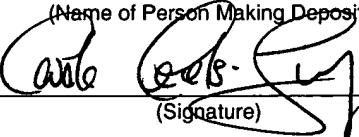
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313, on:

06/02/2003

\_\_\_\_\_  
(Date of Deposit)

Carola Emelius-Swartz

\_\_\_\_\_  
(Name of Person Making Deposit)

  
(Signature)

06/02/2003

\_\_\_\_\_  
(Date of Signature)